## PART B - FEE(S) TRANSMITTAL

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TWO PRUDENT 180 NORTH STI	C& MAYER, LTI MAL PLAZA, SUI ETSON AVENUE		I her State addr trans	Certificate of Mailing or Transmission  hereby certify that this Fee(s) Transmittal is being deposited with the United states Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile ransmitted to the USPTO (571) 273-2885, on the date indicated below.			
CHICAGO, IL 6	0601-6731		N	Melissa E. Kolom		(Depositor's name)	
				11/191	1000-	(Signature)	
				September 23, 20	10	(Datc)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	АТ	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/510,628	10/510,628 05/09/2005		Peter Hegemann		231181	4179	
TITLE OF INVENTION:	USE OF BIOLOGICAL	_ PHOTORECEPTORS .	AS DIRECTLY LIGHT-A	CTIVATED ION CHA	ANNELS		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	E DATE DUE	
nonprovisional	УO	\$1510	\$300	\$0	\$1810	10/01/2010	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			ŭ	
BALLARD, KIMBERLY		1649	435-007200				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	ess an assignee is identi i in 37 CFR 3.11. Comp		THE PATENT (print or typ data will appear on the pr T a substitute for filing an (B) RESIDENCE: (CITY	atent. If an assignee i assignment.		document has been filed for	
Max-Planck-Gesellschaft Zur Foerderung Der Wissenschaften E.V. München, Germany  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity Government							
Please check the appropri	ate assignee category or	categories (will not be pi	inted on the patent):	Individual 42 Corpo	ration or other private gi	roup entity Government	
4a. The following fee(s) a  Issue Fee  Publication Fce (N  Advance Order - #	o small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1216 (enclose an extra copy of this form).				
5. Change in Entity Stat	us (from status indicated SMALL ENTITY statu	•	b. Applicant is no lon	ger claiming SMALL I	ENTITY status. See 37 (	CFR 1.27(g)(2).	
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Authorized Signature Di					ber 23, 2010		
Typed or printed name	Melissa E. Kol	om <sup>t</sup>	<del> </del>	Registration No.	51,860		
an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	iality is governed by 35 application form to the ons for reducing this builtinginia 22313-1450. DC 3-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO spond to a collection of inf	timated to take 12 mini vidual case. Any commer, U.S. Patent and Tra O THIS ADDRESS. SI	ates to complete, including the control of the second of the second of the control of the contro	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.	